

Dr. Jonathan V. Wright's

NUTRITION & HEALING

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Dangerous grains linked to serious disease!

By Jonathan V. Wright, M.D.

There is no food that's good for everyone. We've all heard the old adage "One man's meat is another man's poison." Well, it's true! And the ever-touted "healthy" whole grains that we're often told by nutrition "experts" to load up on are no exception.

While whole grains *are* good nutrition—for *some of us*—the fact is, for years we've known that grains cause digestive disorders that can lead to gas, bloating, and even malnutrition in some people. More recently, we've learned that allergic reactions to grains could actually cause several different types of autoimmune disease. And now, in a new book being published this year, two experts share eye-opening evidence that undiagnosed sensitivities to certain grain proteins can be the route to some very serious—even deadly—diseases including cancer, chronic pain, psychiatric disorders, infertility, liver disease, and osteoporosis. And the frightening list goes on and on.

Sensitivity may start in your intestinal tract

Experts have known for years that certain whole grains (wheat, rye, barley, spelt, triticale, kamut, and possibly oats) are the cause of celiac disease in some people. Celiac disease affects the intestinal tract, and its symptoms can

vary from mild gas, bloating, and loose stools to life-threatening conditions like malabsorption of essential vitamins and nutrients, weight loss, and malnutrition. But celiac disease is somewhat rare.

"Undiagnosed sensitivities to certain grain proteins can be the route to some very serious—even deadly—diseases including cancer, chronic pain, psychiatric disorders, infertility, liver disease and osteoporosis."

Fewer than one in 100 Americans are diagnosed with it. So why should the rest of us worry?

Because for the past two to three decades, at an accelerating pace, researchers have demonstrated that the offending proteins (including gluten, gliadin, and glutenins) found in the above-mentioned grains can cause symptoms and sometimes full-blown diseases that reach far beyond celiac disease. These diseases can affect nearly any area of the body, not just the intestinal tract. They are often called "non-celiac gluten sensitivity symptoms and diseases," or "gluten sensitivity symptoms and diseases," or

simply "gluten sensitivity."

Cure so-called "incurable" autoimmune disease by cutting out grains

I first became aware of the wide reach of gluten sensitivity when I read the book *Relatively Speaking*, originally published in Australia and then re-published in the USA under the title *Your Family Tree Connection*. (This book is now out of print, but it can still be found on-line through used book sources.) The book, written by Dr. Christopher Reading and Ross Meillon, describes Dr. Reading's detective work as he unravels the causes of many supposed "undiagnosable" symptoms by closely examining a family health history.

Years later, during a trip to Australia in the 1980s, I got to visit Dr. Reading's office in Sydney. On one wall was a chart that listed over 100 individuals who had initially consulted Dr. Reading about a common so-called "incurable" disease called lupus (systemic lupus erythematosus or SLE). All the patients on the list had suffered the symptoms (fever, joint pains, and skin rash are among the most common symptoms) and had tested positive for lupus in blood tests. However, everyone on this partic-

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Our mission:

Nutrition & Healing is dedicated to helping you keep yourself and your family healthy by the safest and most effective means possible. Every month, you'll get information about diet, vitamins, minerals, herbs, natural hormones, natural energies, and other substances and techniques to prevent and heal illness, while prolonging your healthy life span.

A graduate of Harvard University and the University of Michigan Medical School (1969), Dr. Jonathan V. Wright has been practicing natural and nutritional medicine at the Tahoma Clinic in Kent, Washington, since 1973. Based on enormous volumes of library and clinical research, along with tens of thousands of clinical consultations, he is exceptionally well-qualified to bring you a unique blending of the most up-to-date information and the best and still most effective natural therapies developed by preceding generations.

Nutrition & Healing cannot improve on these famous words:

"We hold these truths to be self-evident, that all men are created equal, that they are endowed by their creator with certain unalienable rights, that among these are life, liberty, and the pursuit of happiness."

The inalienable right to life must include the right to care for one's own life. The inalienable right to liberty must include the right to choose whatever means we wish to care for ourselves. In addition to publishing the best of information about natural health care, *Nutrition & Healing* urges its readers to remember their inalienable rights to life, liberty, and freedom of choice in health care. This information is published to help in the effort to exercise these inalienable rights, and to warn of ever-present attempts of both government and private organizations to restrict them.

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ular list had been symptom free, with negative blood tests for five years or more! It's true. Over 100 people were *cured* of so-called "incurable" lupus in the 1980s. Even today, in 2002, just about any "lupus specialist" in the United States will say that's impossible...and then resume writing prescriptions for prednisone, the most commonly prescribed patent medication used to treat the disease.

How did Dr. Reading do it? Through complete elimination of all grains except rice and corn. (Note: His treatment also excluded milk and other dairy products from his recommended diet and included heavy nutritional supplementation, both orally and intravenously.)

Autoimmune disease is linked to genetics

When I got back to the United States, I headed for the university medical library where I found a short but very intriguing article in the *Lancet*.¹ The author points out that many people suffering from autoimmune diseases share a genetic marker called HLA-B8; much more commonly than would be expected by chance. (See the list below).

The author's point is that every one of these diseases *except* for celiac disease is an autoimmune disease thought to be caused by an internal reaction by the body against itself. But celiac disease was known to be caused by an external phenomenon, gluten sensitivity to certain grains. The author asks: "Could this external agent, gluten sensitivity, also be involved in causing the rest of these diseases linked to HLA-B8?"

I figured that Dr. Reading had already proven this by helping over 100 people to cure their lupus (SLE) by (among other things) totally eliminating all gluten-containing grains from their diets. So, since the 1980s, every time I'm consulted regarding any of the conditions mentioned in the list below, I recommend absolute avoidance of all gluten-containing grains.

The results I've seen have been fantastic. This is especially true when they are compared with the results of conventional treatment, which usually consists of prednisone prescriptions and other immune-system destroying patent medicines. Although not everyone has been cured, many patients have seen major

Autoimmune diseases linked to the genetic marker HLA-B8 include:

- | | |
|--|----------------------------------|
| • Addison's disease | • Lupus erythematosus (systemic) |
| • Autoimmune hemolytic anemia | • Myasthenia gravis |
| • Celiac disease | • Pernicious anemia |
| • Childhood asthma | • Polymyalgia rheumatica |
| • Chronic autoimmune hepatitis | • Scleroderma |
| • Dermatitis herpetiformis | • Sjogren's syndrome |
| • Graves' disease | • Thyrotoxicosis |
| • Insulin-dependent (type 1) diabetes mellitus | • Ulcerative colitis |
| | • Vitiligo |

improvements or complete remission from their autoimmune diseases, with the exception of patients with established type-1 diabetes, where already-destroyed islet cells cannot be brought back to life, even by a gluten-grain free diet. In these cases, insulin treatment needs to be continued.

When treating the above autoimmune illnesses, I also recommend several other steps along with advising patients to completely avoid gluten-containing grains. First, stop consuming milk and other dairy products. The next step is to undergo comprehensive allergy testing and desensitization, along with gastric analysis. Digestion is abnormal in much more than 50 percent of all problems linked to HLA-B8. Once those steps have been taken, patients usually need to work with their physician to plan on individual treatment regimen, which usually involves taking large quantities of omega-3 fatty acids and many other oral and intravenous vitamin and mineral supplements. Often, hormone level testing and subsequent treatment with DHEA and testosterone can also offer significant benefit.

Dangerous grains are linked to many of today's top illnesses

With their new book, *Dangerous Grains*, being published later this year, James Braly, M.D., and co-author Ron Hoggan, M.A., have reminded me of the still-growing volume of gluten sensitivity research. Dr. Braly estimates that 90 million Americans may suffer from non-celiac gluten sensitivity. In fact, he and Mr. Hoggan report that undiagnosed sensitivities to gluten, gliadin, and other grain proteins are “the root cause of many cancers, autoimmune diseases, neurological diseases, chronic pain syndromes, psychiatric and other brain disorders, and premature death.” Furthermore, they claim, “there is also a clear causal connection with some cases of osteoporosis, epilepsy, learning disorders, attention deficit disorders, infertility, miscarriage, premature births, chronic liver disease, and short stature.”²

Dr. Braly is a long-time clinical investigator into allergy, sensitivity, and health. He warns that anyone who has gluten sensitivity also has other food sensitivities, frequently many of them.

I agree with Braly's view that gluten/gliadin/glutenin sensitivity and dairy product sensitivity are among the more common sensitivities that can lead to the development of many allergies. When gluten sensitivity (or dairy product sensitivity) is found, comprehensive allergy testing should always be done. Keep in mind, however, that although successful desensitization techniques can eliminate other allergies and sensitivities (and allow you to reintro-

Low stomach acid levels could make symptoms worse and treatment more difficult

Recheck the list of problems on page 2 related to HLA-B8. You'll note that pernicious anemia, a rare disorder in which the body does not absorb enough vitamin B₁₂ from the digestive tract, is on the list. One hundred percent of individuals suffering from pernicious anemia have *achlorhydria* (no stomach acid at all), which is the worst form of *hypochlorhydria* (a low stomach acid level). Because all diseases linked to HLA-B8 have a genetic link, they frequently share features, and hypochlorhydria is on the list.

Hypochlorhydria (low stomach acid) is a frequent subject within the pages of *Nutrition & Healing* because it is connected with so many illnesses. (See the September 2001 issue for the most recent article on this topic.)

So be sure to have a doctor check for hypochlorhydria in addition to gluten sensitivity, so you can best treat or prevent any illness.

duce certain foods back into your diet), you shouldn't even try to desensitize gluten/ gliadin/glutenin sensitivity. It, along with dairy product sensitivity, is one of the root causes of allergies, and if you're sensitive, the offending grains and dairy products should be permanently eliminated from your diet.

The first step is to determine your own gluten sensitivity

The most sensitive and specific blood test for gluten/gliadin sensitivity that's presently available is called the tissue *transglutaminase* (tTG) test. It's the one I've used since it became available. Others include the *endomysial antibodies* (EMA) test, which checks mostly “short-lived” antibodies and the *antigliadin antibodies* (AGA) test, which checks “longer-lived” IgG antibodies as well as IgA antibodies. [Note: You will not have antibodies to anything you haven't previously been exposed to. So if you've been avoiding all gluten grains, the test will be negative even if you are truly gluten sensitive.]

Fortunately, these newer blood tests for gluten sensitivity have made diagnosis much easier and have greatly facilitated research. But, keep in mind that the standard test for celiac disease is an intestinal tissue biopsy, followed by a probe for characteristic changes in the biopsied tissue. And since most gluten-

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Dangerous grains

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sensitivity-linked symptoms and diseases (such as those listed in *Dangerous Grains*) are *not* accompanied by changes in the intestine, this older test may not be appropriate. Please make sure your doctor uses the test that's applicable to your specific situation.

Also keep in mind that before the blood tests were available, Dr. Reading figured out many of the disease and symptom connections with gluten sensitivity by examining family trees for various symptoms and diseases. Armed with a copy of *Dangerous Grains* for a comprehensive list, you can examine your own family tree and make a very educated guess as to whether or not you have a gluten sensitivity problem. *Dangerous Grains* is scheduled to be published this

July and will be available in bookstores and through the Tahoma Clinic Dispensary (1-888-893-6878; www.tahoma-clinic.com).

If you have any suspicion that gluten grains may be contributing to your symptoms or illness, check with a health care practitioner skilled and knowledgeable in nutritional medicine, and have testing done, especially the tTG determination. (Remember that the test is only accurate if you've been eating "gluten grains.") To locate such a physician in your area, contact the American College for Advancement in Medicine (1-800-532-3688, www.acam.org), the American Association of Environmental Medicine (1-316-684-9500; www.aaem.com), or the American Association of Naturopathic Physicians (1-703-610-9037, www.naturopathic.org). 🍎

225 reasons to steer clear of dangerous grains

Dr. Braly and Mr. Hoggan have compiled a list of 225 symptoms and disease conditions either linked to or caused by gluten sensitivity. The list includes symptoms and diseases in the following areas:

Gastroenterology: recurrent canker sores, chronic diarrhea, constipation, gas, bloating, abdominal pain, celiac disease, and ulcerative colitis

Hepatology (Liver disease): autoimmune hepatitis, gallbladder malfunction, primary biliary cirrhosis, and elevated liver-function problems thought to be "of unknown cause"

Hematology (Blood diseases): iron and vitamin-deficiency anemias, vitamin K coagulation disorders, low white-blood cells (due to autoimmunity), and idiopathic thrombocytopenic purpura (ITP, a low platelet count again thought to be of "unknown origin")

Internal medicine: unexplained weight loss, chronic fatigue syndrome, IgA nephropathy (an autoimmune kidney disease), kidney stones, and recurrent urinary tract infection

Pneumonology (Lung diseases): bronchiectasia (a disorder of small "bronchial tubes")

Dermatology: vitiligo (an autoimmune depigmentation disorder), alopecia ("patchy" or complete hair loss), hives, and dermatomyositis

Obstetrics/Gynecology: infertility, amenorrhea (a lack of menstrual periods), recurrent spontaneous miscarriage, low birth weight, and vulvodynia (a painful vulva)

Rheumatology: rheumatoid arthritis in adults and children, Sjogren's syndrome, autoimmune connective tissue disease, systemic lupus erythematosus ("lupus"), scleroderma, and polymyositis

Neurology: seizures accompanied by brain calcifications, cerebellar ataxia, brain atrophy, neuromuscular disorders, and peripheral neuropathy

Psychiatry: depression, schizophrenia, and autism

Dentistry: defects in dental enamel

Immunology: IgA deficiency (IgA is a specific immune globulin.)

Oncology (Cancer): cancers of the mouth, pharynx, and esophagus; intestinal lymphomas; other intestinal cancers; sarcoidosis; kidney adenocarcinoma; and rhabdomyosarcoma (a muscle cancer)

Orthopedics: "spontaneous" fractures, osteoporosis

Parasitology: relapsing giardiasis

Infectious diseases: delayed recovery from infectious disease

Endocrinology: type 1 diabetes, autoimmune thyroiditis (Hashimoto's), Addison's disease (weak to very weak adrenal functioning), and Graves' disease (another autoimmune thyroid problem)

Genetics: Down's syndrome, Turner's syndrome, and other chromosome problems

Pediatrics: unexplained weight loss in children over 2 years of age, dirt eating, recurrent infection, failure to thrive, and short stature

This is only a partial list. The entire list will be printed in *Dangerous Grains*. Remember, gluten sensitivity is one possible cause of each of these symptoms or diseases; it's not necessarily the entire or only cause.

CLINICAL TIP 101

A real public service announcement: You don't need drugs to fight depression!

If you turn on the television, you'll start hearing a lot about depression among the elderly. I'm thinking specifically of an announcer who starts off by sympathizing about the rising rate of depression among older adults and then refers viewers to a telephone number so they can get "further information." That sounds helpful enough—like a public service announcement, right? Well, after calling the number given on the ad, I wasn't too surprised to find out that the "further information" was about how depression can stem from a biochemical imbalance in the brain and about how this biochemical imbalance is something that can be corrected with—you guessed it—patent medications!

So, is this a public service announcement or is it an ad paid for by a pharmaceutical company? My guess is that it's a paid-for ad, since a public service announcement might recognize that pumping people with chemicals really isn't doing them any service at all. If the announcement sponsors really wanted to give people "more information," they would make it perfectly clear that, in most cases, prescription drugs are completely unnecessary and that many causes of depression in older adults can be stopped without any patent medicines—simply by supplementing with a few safe, all-natural compounds.

Step 1: Soothe depression with a natural blend of eight amino acids

More than half of all adults, age 60 or over, have digestive systems that have significantly slowed down, which can result in lower-than-optimal levels of one or more (usually many)

nutrients. In many instances, the stomach no longer makes sufficient hydrochloric acid and pepsin to completely digest proteins, causing lower-than-optimal levels of circulating amino acids (the "building blocks" of protein).

Amino acids are the direct precursors of many neurotransmitters, the molecules that carry messages from one nerve cell to the next. If amino acid levels are low, neurotransmitters can't be optimally synthesized and depression may result. [Note: For a complete explanation of how poor digestion and low amino acid levels can result in depression, as well as how to correct those problems naturally, refer to the book *Why Stomach Acid Is Good for You*, which I co-authored with my colleague Lane Lenard, Ph.D. This book is available in most major bookstores and through the Tahoma Clinic Dispensary.]

If, for some reason, you are unable to undergo the individualized testing for amino acid deficiency, you may want to put together (for use during a trial period) your own treatment program that consists of a blend of *all eight* essential amino acids. This is a very safe program, and it may relieve at least some existing depression. My specific guidelines for treatment are as follows:

- Make sure all eight essential amino acids are present during treatment; the essential amino acids are *isoleucine, leucine, lysine, methionine, phenylalanine, threonine, tryptophan, and valine.*
- Take at least 5 grams of the individually-formulated blend of amino acids daily.
- For the best results, use extra quantities of vitamin B₁₂ (1,000 micrograms daily when injected, 5,000

micrograms daily if taken orally) in conjunction with the amino acids. Also, be sure to take extra folic acid at the same time as the vitamin B₁₂. Take 2 1/2 to 5 milligrams of folic acid daily when injected or 5 to 10 milligrams daily when taken orally. **Note:** If your stomach can't digest protein into amino acids efficiently, odds are the vitamin B₁₂ and folic acid aren't being absorbed efficiently either.

- Keep in mind that it usually takes a minimum of four to six weeks to observe early results, longer to obtain the best results.

I'm aware of only one supplement, called **EgSentials**, that contains all eight essential amino acids. EgSentials is patterned after the balance of amino acids naturally found in eggs, which are generally considered to follow the best "complete protein" pattern. EgSentials is available from many natural food stores and other compounding pharmacies. You can also order this product from **Biotech Pharmacal** (1-501-443-9148; www.bio-tech-pharm.com) or from the **Tahoma Clinic Dispensary** (1-888-893-6878; www.tahoma-clinic.com).

Step 2: Learn to slow the chain reaction that's making you blue

As we age, and especially as we progress into our 60s, 70s, and 80s, there are enzymes in the brain called "mono-amine oxidases" (MAOs) that become increasingly active. One of the jobs of these MAO enzymes is to break down neurotransmitters, so as the years pass, and the breaking down increases, more of them are lost. One consequence of this neurotransmitter depletion is depression.

Often, at the same time, digestion also slows down (as mentioned

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Clinical tip 101: Fight depression naturally

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above), which means we won't get as many amino acids from food as before. This makes it increasingly difficult to build neurotransmitters. In other words, you're losing out on neurotransmitters from two different sources.

In the past, there was an effective patent medication that was used to treat depression by chemically slowing down the activity of the MAO enzymes, thus keeping levels of certain neurotransmitters at higher levels. You may have heard of these formerly patented "anti-depressants," generally called **mono-amine oxidase inhibitors** (MAOIs). As I said, MAOI's were effective, but, unfortunately, there were some negative side effects, including dry mouth, weight gain, light headedness, insomnia, and low blood pressure. In some cases, MAOIs caused blood pressure to rise, putting patients at risk for deadly "hypertensive crisis." Because of these side effects, along with an expiration of patents on the synthetic MAOIs, and because of an introduction of newly patented anti-depressants, MAOIs are no longer as widely prescribed.

Conquer depression and defy signs of aging with a powerful natural enzyme inhibitor once "seized" by the FDA

In the 1950s, Romanian gerontology (diseases of aging) expert Ana Aslan, M.D., published her first results concerning a side-effect free *competitive* inhibitor of MAO. "Competitive," in this case, is important, because the enzyme inhibition here is relatively short-lived and can be "broken up" easily, so side effects, if they occur at all, are rare. This competitive inhibitor of MAO enzymes is made up of two natural molecules: **para-aminobenzoic acid** (sometimes called PABA) and **di-ethylaminoethanol** (DEAE). When combined, these two molecules make up a new molecule of a local anesthetic called **procaine**.

Procaine breaks down fairly rapidly in the body, but Dr. Aslan found a way to stabilize it; a process that turns it into a type of "time release" preparation she named **GH-3**. Even with the time release feature, GH-3 breaks down in the body into its components PABA and DEAE, but it lingers as procaine just long enough to partially inhibit MAO enzymes for a few hours, and you thus maintain higher levels of neurotransmitters.

Research studies published mostly from the 1950s through the 1970s showed that GH-3 is an effective anti-depressant for many elderly people and that, as a bonus, it also lowers blood pressure. And, incredibly, many people who were tested actually experienced *anti-aging effects*,

including a return of color to gray hair, more energy, and a more youthful appearance while taking GH-3.

When this news got out, celebrities from all over the world went to visit Dr. Aslan's clinic in Romania. Mike Wallace, the noted news anchor for *60 Minutes*, filmed her clinic, and then reported on the phenomenon on television.

Later, however, there were several negative studies published in the *Journal of the American Medical Association* claiming that procaine has no significant effect. Although Dr. Aslan pointed out that GH-3 and procaine are not the same (for the reasons noted above), since she had no resources to go into doctors' offices and explain the difference or to promote the product, and, most importantly, because she had no patent, GH-3 became much less popular.

Then, in the 1990s, the Federal Food and Drug Administration raided the sole American importer/supplier of Dr. Aslan's original GH-3, Tierra Marketing, and "seized" the product.

After a long and expensive trial, financed by all of us (taxpayers) and Tierra Marketing, the FDA lost, so, thankfully, the original GH-3 remains available (although it is sometimes hard to find). You can purchase the original GH-3 (not procaine) in some health food stores or order it from the Tahoma Clinic Dispensary (1-888-893-6878; www.tahoma-clinic.com).

Amino acids and GH-3: a powerful combination for fighting depression

In my experience, I've found GH-3 helpful in many cases of depression in the elderly, and over the years, no one has reported any negative side effects.

As might be predicted, the effect of GH-3 in conserving neurotransmitters when combined with the effect of essential amino acids in producing more neurotransmitters can be very significant. So before you let any pharmaceutical company's ad—that's disguised as a public service announcement—steer you toward the latest prescription for depression, try to alleviate the blues the natural way.

Learn more about natural healing directly from Dr. Wright

Dr. Wright will be a featured presenter at an upcoming seminar in St. Louis, Missouri, hosted by the American Association of Environmental Medicine (AAEM) titled "Clinical Nutrition for the Practicing Physician." This instructional course is one in a series for healthcare professionals and those with a serious interest in natural therapies. The seminar will take place from April 25-29. For more information, contact AAEM at (316)684-5500 or www.aaem.com.

Don't fall victim to the diabetes epidemic! Fight back with herbs to control blood sugar and prevent organ damage

Diabetes is already the most common glandular disease in the United States and across the world. And, with the U.S. society's current eating and lifestyle patterns, the number of people who suffer from it in this country is growing at an alarming rate—a rate that is only expected to accelerate.¹

Despite the common misperception, having diabetes does not just mean that there's too much sugar in the bloodstream. It's a disease with far-reaching, long-term detrimental effects that can harm vital organs including your eyes, kidneys, nerves, and heart. And though many doctors don't explain it thoroughly, in addition to the treatments for controlling blood sugar levels, any comprehensive therapy for diabetes must also include prevention for these long-term, possibly deadly complications. Luckily, there's herbal help for diabetics.

Prevent type 1 diabetes-induced organ damage with nature's help

There are two major types of diabetes: **type 1 diabetes** (insulin-dependent) and **type 2 diabetes** (adult onset diabetes).

By the time type 1 diabetes appears, most of the insulin-secreting cells of the pancreas have already been destroyed. Unfortunately, by the time diabetes is diagnosed, it is usually too late to stop or reverse the destruction of the insulin-secreting cells, and patients are forced to take insulin on a daily basis. Hence, while herbal therapy for type 1 diabetes can help to control blood sugar, it's largely aimed at preventing the

long-term organ damage that is often a consequence of the disease.

All-natural extracts could save your eyes, liver, kidneys, and heart

Bilberry, ginkgo and grapeseed extracts are useful for preventing and treating certain diabetes-related complications that involve fine blood vessels such as diabetic retinopathy (damage to the retina of the eye caused by diabetes). The herbs protect other blood vessels in the body too, and may help reduce the severity of nephropathy (kidney damage) and neuropathy (nerve damage). Grapeseed extract may also help prevent heart disease, another consequence of long-term diabetes.

Licorice and baicalein (from baical skullcap) can be added to a treatment program when there is a particular risk of damage to the eyes and other nervous tissue. Both have been shown to reduce toxic levels of particular sugars that accumulate in the eye lens, liver, kidney, and Schwann cells (cells that insulate nerves).²

Evening primrose oil (or the gamma-linolenic acid it contains) has also been shown to improve diabetes-related nerve damage.

Herbs help regulate blood sugar in type 2 diabetes

Type 2 diabetes is usually associated with obesity (80 percent of patients are overweight), excessive intake of carbohydrates, and a lack of exercise. The disease is also characterized by inadequate insulin secretion and insulin resistance (reduced response to insulin); however, it's not known

which of these two abnormalities is the primary cause.³

The herb **Gymnema sylvestre** (as featured in the January 2002 issue of *N&H*) may be useful to improve blood sugar control and reduce the need for insulin or hypoglycemic drugs.⁴

Other herbs that assist with blood sugar control include **goat's rue** (*Galega officinalis*), and **fenugreek**.

Goat's rue has long been used to treat diabetes; one of its active components, galegine, makes insulin work better, and was actually used as the model for one class of anti-diabetic drugs called biguanides (marketed as Metformin and Phenformin). Phenformin was pulled from the market because of safety issues, but Metformin is still available.

Fenugreek is high in soluble fiber which could be the reason why it helps regulate blood sugar. It works best when taken as the powdered seed (as opposed to extract form).

Recent studies show up to a 40% improvement with natural diabetes control

In a recent double-blind, placebo controlled study, **Plantago psyllium hulls** showed positive results after a six-week period in patients who were also following a low-fat diet.⁵ Though no significant changes in weight occurred, the patients' fasting plasma glucose, total and LDL cholesterol, and triglycerides all showed a significant reduction, whereas HDL cholesterol ("good" cholesterol) increased significantly. Changes in the average values of these readings

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Natural Response



A potential vitamin cure for sleep apnea

Q: *Several years ago I stumbled onto a cure for sleep apnea in an article about beriberi. I have never heard of anyone with beriberi but I have heard of many people with sleep apnea, myself included. At the end of the article was one sentence that mentioned sleep apnea was caused by a lack of B₁. As tests had shown that I was only breathing one minute out of three and a half, I was very interested. The only help the doctors gave me was to put me on a machine that blew air into my face all night, to keep me breathing.*

I jumped at the chance to cure myself naturally. I started taking B₁ with not too much improvement when the health store owner told me I should take a B complex with extra B₁. This I did, and within 30 days I was breathing normally, and I wasn't even snoring anymore. I had always been a heavy snorer.

As long as I keep up on the "Bs" I keep breathing. B₁ is very important to the part of the brain that controls breathing.

I trust this will help your readers. There are a lot of sleep problems out there.

---J.W.S., Billings, Montana

P.S. I'm 73 and have had 7 strokes plus congestive heart failure.

A: Your personal health history gives a clue about why this worked for you. Beriberi was found years ago to be a "symptom complex" entirely due to severe vitamin B₁ deficiency. One of the more serious manifestations of beriberi is congestive heart failure, which you have had. It's possible that you as an individual have a higher than usual requirement for vitamin B₁, and that another manifestation of that requirement (in your case) was sleep apnea.

So it's possible that extra vitamin

B₁ with B-complex, which helped eliminate your sleep apnea, might work for you and not for others. But it's also possible that this remedy might help many others...there's no way to say unless it's tried.

Fortunately, vitamin B₁ is very safe. No one has yet reported a serious overdose; very occasionally, someone tells me that a large amount (500-1,000 milligrams daily) makes them drowsy. B-complex vitamin

capsules or tablets have not been associated with serious side effects either; very occasionally, someone tells me that he or she must take them with meals, as taking them when the stomach is empty causes nausea.

Your letter didn't mention the quantities of vitamins you took. It's safe to "work up to" 500 milligrams of vitamin B₁ twice daily along with a B-complex formulation, also twice daily.

Fight diabetes with herbs

(continued from page 7)

were substantial (in the range of about 10 to 40 percent).

Aloe vera juice also provides benefits in the reduction of blood sugar. Two clinical trials conducted in Thailand provide preliminary evidence that juice derived from the pulp of aloe vera leaves can reduce blood glucose and triglyceride levels in patients newly diagnosed with diabetes.^{6,7} Though glucose levels were still not within the normal range after six weeks of treatment with the aloe vera, the authors suggest that higher doses may reduce blood sugar levels even further.

Taking herbs to control blood sugar is best done under professional guidance

All of the herbs and extracts listed above can be easily obtained at your local health-food store, the Tahoma Clinic Dispensary (1-888-893-6878; www.tahoma-clinic.com), and many on-line vitamin and herb distributors. However, before beginning any new treatment program, please consult your doctor and a suitably qualified clinician who can help you determine an individualized herbal program, including doses, based on your personal health history and needs. For a referral to a physician trained in herbal therapies, contact the American Association of Naturopathic Physicians (1-703-610-9037; www.naturopathic.org).

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